## Senior Services General Registration Form EFFECTIVE JANUARY 1, 2023 THROUGH DECEMBER 31, 2024

A Division of the Recreation & Community Services Department of the City of Middletown Senior & Community Center Membership, 61 Durant Terrace, Middletown, CT

**EMERGENCY CONTACT:** 

New Member \_\_\_\_\_Renewal

**PARTICIPANT:** 

| Name:   | Name:   |
|---|---|
| First Last  | First Last  |
| DOB:/ Age: Sex:   | Relationship:   |
| Street Address:   | Street Address:   |
| City/Town:Zip:  | City/Town:Zip:  |
| Phone: Preferred: ( ) 2 <sup>nd</sup> : ( )   | Phone: Home: ( ) Cell: ( )  |
| Email:  | Email:  |
| VOLUNTARY DEMOGRAPHIC INFORMATION: This section is optic<br>Race or ethnic group:White/CaucasianBlack/African Americ<br>American Native or Alaskan NativeNative Hawaiian or Other   | canAsianTwo or More RacesHispanic/Latino<br>r Pacific Islander  |
| ANY SPECIAL CONDITIONS:   |   |
| NEWSLETTERS: I am a Middletown Resident and would like to re<br>YesNo Mail Newsletter To This Middletown Address: _   |   |
| agree that programs can be physically demanding, but I have the pataken, I hereby give permission for R&C to use said photos or vide social media, etc. In the event of an emergency and the emergency transported to the Middlesex Hospital or any nearby medical facili responsibility for all costs associated with medical treatment. To indemnify and hold harmless the City of Middletown and its employed. | In Recreation and Community Services ("R&C") Programs, I understand and physical ability needed to participate. In the event photos or video are so in promotional literature including but not limited to, brochures, flyers, cy contact person cannot be reached, I hereby give permission to be lity. It is hereby understood and agreed that I shall assume full financial the fullest extent permitted by law, I agree to release, discharge and oyees from and against any claims, injuries or damages caused by or by the Middletown Recreation and Community Services Department. A gered as valid as the original. |
| hereby for myself, my heirs, and assigns, waive, release, and forev   | icipation in any such bus trip, to the fullest extent permitted by law, I do<br>ver discharge the City of Middletown, its employees, and agents, from and<br>oever in law or in equity, which may arise by reason of injury or death, or  |
| SUBSTANTIAL LEGAL RIGHTS. I HAVE NOT BEEN INDUCED TO SIG  | ND UNDERSTAND THAT BY SIGNING THIS AGREEMENT, I AM GIVING UP IN THIS AGREEMENT BY ANY PROMISE OR REPRESENTATION, AND I SIGN   |
| program, activity, bus trip, etc. Refunds will be given as a credit o   | ust give 2 FULL business days' notice to be entitled to a refund for a on your senior center account which can be used towards future re not transferable to another member. From time to time, the Senior  |

Services Division may run special trips or programs that have a large upfront cost to the Senior Services Division. These programs will be advertised as non-refundable and non-transferable and treated as such. Refunds will not be given for circumstances beyond the control of the Senior Services Division (e.g. weather, equipment failure, etc.). Whenever possible, cancelled class(es) will be rescheduled. It is your responsibility to cancel any program or bus trip if you are unable to attend. You can call the office, cancel on schedulesplus, or stop by the front desk to cancel. Failure to cancel resulting in a No Show / No Cancel will be charged a \$15 surcharge for each and every program or trip missed. Three no shows/no cancel in a 6 month period will result in a 60 day suspension from programs/trips. You must check-in using your membership scancard to have your attendance logged. Failure to check-in for a program will be treated as a no show/no cancel.

RULES & CODE OF CONDUCT: I have been issued the Senior Services Division
Membership Rules and Code of Conduct as well as the Senior Bus Trip Policies
and Procedures. These rules may be updated as necessary during my membership period
and I understand that complying with these rules is a condition of my membership.

| Signature (required) |  |
|----------------------|--|
| x                    |  |
| Date:                |  |